

SCJA21  
Rev. 5/98

**FINANCIAL AFFIDAVIT**  
IN SUPPORT OF REQUEST FOR APPOINTMENT OF COUNSEL OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEES

IN UNITED STATES  MAGISTRATE  DISTRICT  APPEALS COURT or  OTHER PANEL (Specify below)

IN THE CASE OF United States v.s. Steven Cross

FOR **FILED**  
AT March 12, 2008  
MAR 12 2008

LOCATION NUMBER

PERSON REPRESENTED (Show your full name) **Steven Cross**

MAGISTRATE JUDGE  
GERALDINE SOAT BROWN  
UNITED STATES DISTRICT COURT

CHARGE/OFFENSE (describe if applicable & check box →) **18 U.S.C. Section 922(g)(1)**

Felony  Misdemeanor

DOCKET NUMBERS

Magistrate
District Court <b>08CR148</b>
Court of Appeals

1  Defendant—Adult  
2  Defendant - Juvenile  
3  Appellant  
4  Probation Violator  
5  Parole Violator  
6  Habeas Petitioner  
7  2255 Petitioner  
8  Material Witness  
9  Other

EMPLOY- MENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed		
	Name and address of employer: _____		
	IF YES, how much do you earn per month? \$ _____	IF NO, give month and year of last employment How much did you earn per month? \$ _____	
	If married is your Spouse employed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$ <u>4,000</u>	If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____	
ASSETS	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	OTHER INCOME	RECEIVED	SOURCES
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES	\$ _____	_____
CASH	Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$ _____		
PROP- ERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	IF YES, GIVE THE VALUE AND \$ DESCRIBE IT	VALUE <u>4000</u>	DESCRIPTION <u>96 Skylane</u>

OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS	Total No. of Dependents	List persons you actually support and your relationship to them	
		SINGLE <input checked="" type="checkbox"/> MARRIED WIDOWED SEPARATED OR DIVORCED	<u>1</u>	{ _____ }	
DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	APARTMENT OR HOME:	Creditors	Total Debt	Monthly Paymt.	
{ }	{ }	Rent	\$ <u>950</u>	\$ <u>950</u>	
		Ashine, utilities	\$ <u>300</u>	\$ <u>300</u>	
		Food, etc.	\$ <u>350</u>	\$ <u>350</u>	

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

3/12/08

SIGNATURE OF DEFENDANT  
(OR PERSON REPRESENTED)

→ Steven Cross